

IDAHO REAL ESTATE COMMISSION
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BOISE ID 83720-0077
OFFICE AND EXPRESS MAIL ADDRESS
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BOISE, ID 83702
PHONE (208) 334-3285
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RELAY SYSTEM) 1 800 377-3529



REE-004-4
Rev 6/00

No. _____

IDAHO REAL ESTATE COMMISSION VERIFIED COMPLAINT FORM

INSTRUCTIONS: Please type or print clearly in pen and ink. Complete all applicable sections of this form fully and accurately. Attach legible copies of contracts and all other documents relating to your complaint. You should provide all information which you know or can discover with reasonable investigation. For assistance in completing or submitting this complaint, contact the Idaho Real Estate Commission. If more space is needed, attach extra sheets.

PLEASE NOTE: The Idaho Real Estate Commission regulates real estate licensees. The Commission is not empowered to enforce, interpret, modify, rescind or cancel listing agreements, purchase and sale agreements or any other contract; or to order the return of earnest money, award damages, settle real estate commission fee disputes or otherwise settle claims.

The Idaho Real Estate Commission's jurisdiction extends only to potential disciplinary actions where violations of the Idaho License Law and Commission Administrative Rules are found. The Idaho License Law does not authorize the Idaho Real Estate Commission to compel the payment of money or to render a monetary judgment in your favor. Such an action falls within the jurisdiction of the civil courts.

I. INFORMATION ABOUT PERSON(S) FILING COMPLAINT

Name(s) _____
Last First Middle

Address _____

City, State and Zip Code _____

Telephone (Home) _____

Occupations(s) _____

Were you a buyer/seller/or real estate agent? _____

II. INFORMATION ABOUT BROKER(S) AND/OR SALESPERSON(S) INVOLVED IN COMPLAINT

1. Name _____

License type (Check one) ☐ Broker ☐ Associate Broker ☐ Salesperson

Who did they represent? _____

Address _____

Telephone _____

Firm name _____

Address _____

Telephone _____ Responsible broker _____

Attorney's name and address _____

Turn To Other Side

2. Name_____

License type (Check one) ☐ Broker ☐ Associate Broker ☐ Salesperson

Who did they represent?_____

Address_____

Telephone_____

Firm name_____

Address_____

Telephone_____Responsible broker_____

Attorney's name and address_____

III. GENERAL INFORMATION ABOUT COMPLAINT

1. Type of real estate transaction: (check one)

☐ Residential ☐ Commercial ☐ Industrial ☐ Timeshare ☐ Bare Land ☐ Lease Option

☐ Other (describe) _____

2. Dates(s) of transaction(s)_____

3. If known, state specific law or rule violations you are alleging:

4. I ☐ have ☐ have not (check one) contacted the persons complained about and attempted to resolve this matter. Persons and dates contacted.

5. I ☐ have ☐ have not (check one) retained an attorney to assist in resolving this or a related matter.

Attorney's name_____Telephone _____

Attorney's address_____

Should we contact your attorney about this matter? _____

6. List the names of all other agencies and associates with whom you have or intend to file a complaint.

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- ☐ may be filed in a court of law ☐ don't know

Case # _____

Court address _____

Type of action _____

Case status _____

8. Have other complaints about this or related matters been filed with the Commission?

☐ Yes ☐ No ☐ Don't know (check one)

If yes, give details: _____

9. State specific factual allegations upon which your complaint is based. In your own words, state all of the facts which relate to your complaint, including dates and places. **Use extra paper if necessary.**

Turn To Other Side

10. I ☐ am ☐ am not (check one) willing to appear under oath as a witness to cross-examination concerning the allegations made in the complaint. (**The complainant's unwillingness to testify may be the basis for the Commission dismissing the complaint after its investigation and preliminary consideration.**) If you are not willing to testify, state reason(s):

11. Attach clear copies of **ALL** pertinent documents and papers which directly or indirectly relate to this complaint.

IV. VERIFICATION OF COMPLAINT

I understand a copy of this complaint will be given to any person or firm against whom I have complained.

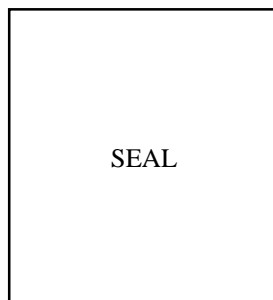
I (we), the complainant(s), declare under oath that the above is true to the best of my (our) knowledge.

Dated this _____ day of _____, 20_____.

Complainant(s):

State of _____)
) ss.
County of _____)

Subscribed and sworn to before me this _____ day of _____, 20_____.



NOTARY PUBLIC

My Commission expires: _____

Residing at: _____

COMMISSION ACTION ON COMPLAINT: Your complaint will be assigned to an investigator. You will receive written confirmation that your complaint has been received. You may be asked to submit additional information or clarification, and you will be notified as to the final disposition of your complaint.

END